

**JONES COUNTY WATER
418 HWY 58 NORTH
UNIT B
TRENTON, NC 28585**

UTILITY SERVICE APPLICATION

PLEASE READ THE FOLLOWING RULES AND REGULATIONS CAREFULLY.

1. A **\$100** water deposit is required to have service established. If the location is within the Town of Trenton (city limits) you will also be required to pay a **\$50** sewer deposit. Curbside trash pickup is also available for a deposit fee of **\$50** per can requested. Trash service is \$20 per can per month. Sewer deposits and trash deposits are refundable upon termination of services and settlement of all accounts. The water deposit is refundable after a year of service if the account has established excellent credit and the customer requests the refund.
2. The individual in whose name the account is established shall be responsible for payment of all bills incurred upon receipt of this application.
3. Meters are read and bills are rendered monthly. Bills are due when rendered and become delinquent twenty days thereafter. If the account is not paid within sixty days from bill date of oldest delinquent bill, service will be discontinued by the county.
4. Service discontinued for non-payment will be charged a late/penalty/reconnection fee of **40.00**. This fee will not be waived for any reason. Failure to receive bills or notices shall not prevent bills from becoming delinquent or relieve the consumer from payment. Before services can be restored the entire bill must be paid in full plus the **\$40.00** late/penalty/reconnection fee.
5. Not less than three days notice must be given to the County Office to discontinue service. The outgoing party shall be responsible for all water consumed up to the time of departure or the time specified for departure.

****Please fill out the following information to insure proper billing.**

Check all services applying for ☐ **water** ☐ **trash** ☐ **sewer**

Physical Address of Meter _____

Applicant's Name _____

Mailing Address _____

Phone Number (include area code) _____

Email address(optional) _____

*Your Social Security Number and date of birth are being requested for verification of your identity and may be used to collect any debt owed to the County. There is no statutory or other authority requiring you to give your Social Security Number.

Soc. Sec. # _____ Date of Birth _____

I have read and understand the above rules and regulations of the Jones County Water Department and agree to abide by same.

_____ Date _____
Applicant's Signature